

Revision: HCFA-PM-86-20 (BERC)
September 1986

Attachment 3.1-B
Page 7a-1.1

State: OKLAHOMA

AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
MEDICALLY NEEDY GROUP(S): All Groups

20. Extended services for pregnant women (cont'd)

- Psychosocial Assessment/Counseling

Psychosocial assessment/counseling is covered only for high risk pregnant women, as identified in the high risk assessment tool (POPRAS III). Psychosocial assessment/counseling is appropriate in order to develop a social work care plan based upon the health risks due to psychosocial factors. Counseling is appropriate for women whose complications require psychosocial intervention as an essential element of treatment in dealing with the complication e.g., use/abuse of drugs/alcohol, significant psychological condition, etc. This service will be used to reduce the likelihood of a poor birth outcome. This service must be provided by a Masters of Social Work (MSW) or a bachelor level social worker under the direct supervision of a MSW.

- Genetics Assessment Counseling

Genetics assessment/counseling is covered only for high risk pregnant women, as identified in the high risk assessment tool (POPRAS III). It is designed to deliver information to a pregnant woman about inherited disorders or environmental exposures to toxic substances that may cause congenital defects in the fetus. This service is performed by a genetic counselor or a registered nurse in consultation with a genetic counselor.

STATE <u>Oklahoma</u>	A
DATE REC'D <u>MAR 30 1992</u>	
DATE APP'D <u>JUN 28 1994</u>	
DATE EFF <u>FEB - 1 1992</u>	
HCFA 179 <u>92-07</u>	

New 02-01-92

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Supersedes
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STATE: OKLAHOMA

AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED

MEDICALLY NEEDY GROUP(S): ALL GROUPS

24.

- f. Personal care services in recipient's home, prescribed in accordance with a plan of treatment and rendered by qualified person under supervision of a R.N.

Non-Technical Medical Care is provided to patients approved by the Agency for this type of care in own home. The provider is a person who is not legally responsible relative of the client being served, who is certified as qualified to provide the services under the supervision of a R.N.

STATE <u>oklahoma</u>	A
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DATE APPV'D <u>6/24</u>	
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State OKLAHOMA

AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
MEDICALLY NEEDY GROUP(S): All Groups

24.g. Birth Center Services

Payment is made for compensable birthing center services to those facilities, places, or institutions which are maintained or established primarily for the purpose of providing services of a certified midwife or licensed doctor to attend a woman in delivery and birth. Services for adults and children include admission to the birthing center of low risk uncomplicated pregnancies, with an anticipated spontaneous delivery for the period of labor and delivery. Services are limited to one each nine months.

Eligible providers are birthing centers which have been licensed by the Oklahoma State Health Department and meet the following requirements:

- (1) Have a written agreement with a board certified OB/GYN to provide coverage for consultation, collaboration or referral services as defined by the American College of Nurse Midwives.
- (2) Have a medical director who is a board certified OB/GYN and is responsible for establishing patient protocols and other functions as defined in requirements for state licensure. This individual may, or may not, be the physician providing individual patient coverage for consultation, collaborative or referral service.
- (3) Have a written agreement with a referral hospital which is a Class II hospital. Class II hospital is defined as a facility with 24-hour availability of OB/GYN and capability of performing a c-section within thirty minutes.
- (4) Must be accredited by the Commission for the Accreditation of Freestanding Birth Centers.

A	
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